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		Application Number	10/652,506
		Filing Date	8/28/2003
		First Named Inventor	Daniel Mudd
		Art Unit	3753
		Examiner Name	Krishnamurthy, Ramesh
Total Number of Pages in This Submission	2	Attorney Docket Number	012252-0011

ENCLOSURES <i>(Check all that apply)</i>		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request for Withdrawal as Attorney or Agent and Change of Correspondence Address; Return Postcard
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Stradling Yocca Carlson & Rauth		
Signature			
Printed name	Jan Weir		
Date	7/18/06	Reg. No.	43253

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**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
AND CHANGE OF
CORRESPONDENCE ADDRESS**

Application Number	10/652,506
Filing Date	8/28/2003
First Named Inventor	Daniel Mudd
Art Unit	3753
Examiner Name	Krishnamurthy, Ramesh
Attorney Docket Number	012252-0011

To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified patent application, and

all the attorneys/agents of record.
 the attorneys/agents (with registration numbers) listed on the attached paper(s), or
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NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are: the client transferred the case to Ms. Vanessa Owen on October 11, 2005

CORRESPONDENCE ADDRESS

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<input checked="" type="checkbox"/> Firm or Individual Name	Vanessa Owen, Esq. Brown Raysman Millstein Felder & Steiner LLP				
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Signature					
Name	Jan Weir	Registration No.			
Date	7/18/06	Telephone No.	949-725-4196		

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